

12:24 FAX 804 681 4081

OYEN WIGGS GREEN MUTALA

004

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail****Mail Stop ISSUE FEE**
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(703) 746-4000or **FAX**

INSTRUCTIONS: This form should be used for transmitting the **ISSUE FEE** and **PUBLICATION FEE** (if required). Blocks 1 through 3 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Notice Use Block 1 for any change of address)

000720

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03/10/2005

OYEN, WIGGS, GREEN & MUTALA LLP
480 - THE STATION
601 WEST CORDOVA STREET
VANCOUVER, BC V6B 1G1
CANADA

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Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

MaryAnne Broccolo

(Depository name)

(Signature)

(Date)

May 20, 2005

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/631,827	08/01/2003	Robert P. O'Sullivan	0139 0001 05/23/2005 HBIZUNE2 00000018	1705 10631827

TITLE OF INVENTION: **ERGONOMIC TOOL BOX****01 FC:2501 700.00 DA**
02 FC:1504 300.00 DA
03 FC:8001 0.00 DA

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	05/10/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
BUI, LUAN KIM	3728	206-373000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 **Oyen Wiggs Green & Mutala**

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY) **05/23/2005 HBIZUNE2 00000018 021037 10631827****01 FC:2501 700.00 DA**
02 FC:1504 300.00 DA
03 FC:8001 0.00 DAPlease check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies **3**

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number **02-1037** (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Gerald O.S. OyenDate **May 20 2005**

Typed or printed name

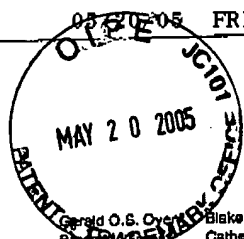
Registration No. **27,280**

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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PTOL-85 (Rev. 12/04) Approved for use through 04/30/2007.

OMB 0651-0033 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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David H. Takagawa
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20 May 2005

FAX TRANSMITTAL*This is page 1 of 4 pages***To: MAIL STOP ISSUE FEE**
Commissioner for Patents*by fax no. (703) 746-4000***From: Gerald O.S. Oyen****Appln. No.: 10/631,827** **Our File: O139 0001****Title: ERGONOMIC TOOL BOX****Re: *Payment of Issue Fee*****The following documents are enclosed:**

- Issue Fee Transmittal Letter;
- Form PTOL-85 (in duplicate)

Confirmation: ☐ follows by mail; ☐ follows by courier; ☒ will not follow

In the event of transmission problems, please telephone MaryAnne Broccolo at 604-669-3432 extension 8948.

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O139 0001
GOSO/mib

Paper No.: _____

IN THE UNITED STATES PATENT & TRADEMARK OFFICE

Inventor(s): O'SULLIVAN, Robert P.
Title: ERGONOMIC TOOL BOX
Serial No.: 10/631827
Filed: 1 August 2003
Examiner: Luan Kim BUI
Date: 20 May 2005

Art Unit: 3728

Mail Stop Issue Fee
Commissioner for Patents
P.O. Box 1450
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By facsimile: (703) 746-4000

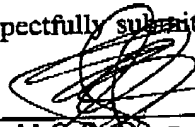
Dear Sir:

The following are submitted with respect to the above-referenced application:

- (X) Issue Fee (\$700)
- (X) Publication Fee (\$300)
- (X) In connection with issuance of a patent:
 - () Supplemental Declaration
 - (X) Form PTOL-85
- (X) Advance order of 3 copies (Fee \$9.00)
- (X) The Commissioner is hereby authorized to charge the indicated fees (\$1,009) and any additional fees associated with this communication or credit any overpayment to Deposit Account No. 02-1037.

Respectfully submitted,

By:


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